Approved for use through 7/31/2008, QMB 9651-0032

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it discloye a velid QMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I CR SMALL ENTITY SMALL ENTITY (Cotumn 1) (Column 2) FEE NUMBER FILED NUMBER EXTRA RATE RATE FEE FOR BASIC FEE 07 CFR 1.18(10) OR TOTAL CLAIMS 67 CFR 1.18(d) minus 20 = CR NOEPENDENT CLAIMS X S CR 67 CFR 1.180/0 minus 3 MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) CR . TOTAL TOTAL OR " If the difference in column 1 is less than zero, enter "O" in column 2. **CLAIMS AS AMENDED - PART II** OTHER THAN OR (Column 2) (Cotumn 3) SMALL ENTITY (Column 1) SMALL ENTITY CLAIMS HIGHEST MUMBER ⋖ PRESENT ADDI-TIONAL ADDI-TIONAL REMAINING RATE AFTER AMENDMENT PREVIOUSLY PAID FOR EXTRA FEE Minus Total ENDM CP CPR LIKE OR brdependent CF CFE 1,1000 3 X 5 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4)) OR TOTAL ADD'L FEE TOTAL CD ADO'L FEE 32.0 (Column 1) (Column 2) (Column 3) CLAIMS REMAINING HIGHEST $\boldsymbol{\omega}$ PRESENT ADDI-TIONAL ADDI-TIONAL RATE RATE NUMBER AFTER EXTRA PREVIOUSLY FEE Total (D' CFR 1.18(45) QC. X S OR OR FRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(d)) OR TOTAL ADD'L FEE ADO'L FEE OR (Cotumn 1) (Column 2) (Cotumn 3) HIGHEST CLAIMS Ö PRESENT RATE REMAINING NUMBER PREVIOUSLY RATE ADDI ADDI TIONAL TIONAL AFTER AMENDMENT PAID FOR FEE Corporal Action Minus X 3 OR Independent (27 cFR 1.14(3)) OR PRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (87 OFR 1.15(4)) OR TOTAL TOTAL ADO'L FEE OR ADD'L FEE If the entry in column 1 is tess than the entry in column 2, write "O" in column 3. "If the strip in column 1 is tess than the entry in column 2, write "O' in column 3.

"If the "Highest Number Previously Paid For" In THIS SPACE is less than 3, enter "3".

"If the "Highest Number Previously Paid For" In THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fite (and by the USPTO by process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. There will vary depending upon the individual case. Any commenta on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Department of Commerce. P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 1) (Column 2) TYPE [OR SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE FOR OR BASIC FEE NUMBER FILED NUMBER EXTRA BASIC FEE **TOTAL CHARGEABLE CLAIMS** minus 20= X\$ 25=X\$50= OR INDEPENDENT CLAIMS minus 3 = X100= X200= OR **MULTIPLE DEPENDENT CLAIM PRESENT** Г +180= +360= OR column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR CL'AIMS AS AMENDED - PART II **OTHER THAN** OR **SMALL ENTITY SMALL ENTITY** (Column 3) Column 1 (Column 2) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL ENDMENT **AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR Total Minus X\$ 25= X\$50 OR Independent Minus X100= X200= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +180= +360= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT: TIONAL RATE **TIONAL AFTER** PREVIOUSLY RATE **EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$ 25= X\$50= OR Independent Minus X200= X100 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +180= OR +360= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 3) (Column 2) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL TIONAL EN RATE RATE **AFTER PREVIOUSLY** EXTRA . **AMENDMENT** PAID FOR FEE FEE ENDM Total Minus X\$ 25= X\$50= OR Independent Minus X100= X200= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

OR

+360=

ADDIT: FEE

TOTAL

+180=

ADDIT, FEE

TOTAL

[•] If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.